

UNITED STATES DISTRICT COURT

for the SOUTHERN DISTRICT OF NEW YORK

BKNS Management LLC, derivatively on behalf of)
Abbson LLC)
)
)
)
Plaintiff(s))
v.) Civil Action No. 1:24-cv-05581
Messner Reeves LLP; Clearwater Premiere Perpetual)
Master LLC; Jonathan Wright; Torben Welch; and Titan)
Financial, LLC)
)
Defendant(s))

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address)

TITAN FINANCIAL, LLC
30 North Gould Street
Sheridan, WY 82801

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Joseph Zelmanovitz
STAHL & ZELMANOVITZ
747 Third Avenue, Suite 33 B
New York, NY 10017

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

Date: 7/25/2024


Wanda Gonzalez

/s/ J. Gonzalez

Signature of Clerk or Deputy Clerk

AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No. _____

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)*
was received by me on *(date)*

I personally served the summons on the individual at *(place)*

on *(date)* _____ ; or

I left the summons at the individual's residence or usual place of abode with *(name)*
, a person of suitable age and discretion who resides there,
on *(date)* _____ , and mailed a copy to the individual's last known address; or

I served the summons on *(name of individual)* _____ , who is
designated by law to accept service of process on behalf of *(name of organization)*

on *(date)* _____ ; or

I returned the summons unexecuted because _____ ; or

Other *(specify)*: _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00 .

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

AFFIDAVIT OF SERVICE THROUGH THE SECRETARY OF STATE

UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF NEW YORKPurchased/Filed: July 25, 2024
Index # 1:24-cv-05581MKV

BKNS Management LLC, derivatively on behalf of Abbson LLC

Plaintiff

against

Messner Reeves LLP, et al.

Defendant

STATE OF NEW YORK
COUNTY OF ALBANY SS.:

James Perone _____, being duly sworn, deposes and says: deponent is over the age of eighteen (18) years; that on July 30, 2024, at 11:00 AM, at the office of the Secretary of State of the State of New York in the City of Albany, New York deponent served the annexed

Summons in a Civil Action Complaint with Jury Trial Demanded

on

Titan Financial LLC _____, the

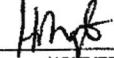
Defendant in this action, by delivering to and leaving with Sue Zouky _____, AUTHORIZED AGENT in the Office of the Secretary of State, of the State of New York, personally at the Office of the Secretary of State of the State of New York, 99 Washington Avenue, Albany, NY, 1 true copies thereof and that at the time of making such service, deponent paid said Secretary of State a fee 40 dollars; That said service was made pursuant to Section 304 Limited Liability Company Law. Deponent further says that deponent knew the person so served as aforesaid to be the agent in the Office of the Secretary of State of the State of New York, duly authorized to accept such service on behalf of said defendant

Description of the person served: Approx. Age: Over 65 Approx. Wt: 125lbs Approx. Ht: 5'1

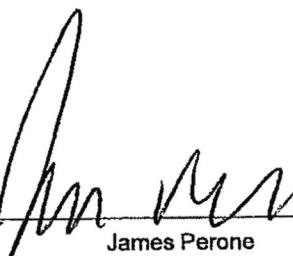
Color of skin: White Hair color: Red/Blonde Sex: Female Other: _____

Sworn to before me on this

23rd day of August 2024



HEATHER MORIGERATO
NOTARY PUBLIC, STATE OF NEW YORK
NO. 01MO6281464
QUALIFIED IN ALBANY COUNTY
COMMISSION EXPIRES MAY 14, 2028



James Perone
Attny's File No.
Invoice Work Order # S1912352

SERVICO, INC., P.O. Box 871, ALBANY, NY 12201

UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF NEW YORK

BKNS Management LLC, derivatively on behalf of Abbson LLC
vs
Messner Reeves LLP, et al.

SUPPLEMENTAL AFFIDAVIT OF SERVICE/MAILING

James Perone, being duly sworn, says:

I am over the age of 18 years and am not a party to this action. On 8/8/2024 I sent on behalf of the Plaintiff herein a copy of the

Summons in a Civil Action Complaint with Jury Trial Demanded

with notice of the service upon the Secretary of State thereof to **Titan Financial LLC**, the Defendant herein, by **Registered mail #RB816198577US** in a securely sealed envelope with sufficient postage thereon with return receipt requested addressed to:

Titan Financial LLC

30 North Gould Street
Sheridan, WY 82801

ATTACHED HERETO AND MADE A PART HEREOF IS THE

- RETURN RECEIPT FROM THE DEFENDANT
- RETURNED MAIL
 - UNCLAIMED
 - RETURNED TO SENDER
 - UNDELIVERABLE AS ADDRESSED

Sworn to before me on this

23rd day of August 2024

H.M.g

HEATHER MORIZERATO
NOTARY PUBLIC, STATE OF NEW YORK
NO. 01M06261464
QUALIFIED IN ALBANY COUNTY
COMMISSION EXPIRES MAY 14, 2028

James Perone
Attny's File No.
Invoice-Work Order # S1912352

Registered No. RBB16198577US

POST ORANGE Date Stamp 0206 51

Postage \$ 2.87 Extra Services & Fees (continued)

Extra Services & Fees \$ 1.30

Registered Mail \$

Return Receipt (hardcopy) \$ 4.00

Return Receipt (electronic) \$ 10.00

Restricted Delivery \$ 1.00

Total Postage & Fees \$ 26.17

Customer Must Declare Full Value \$ 1.00

Received by ANY TIME

Domestic insurance up to \$50,000 is included based upon the declared value. International indemnity is limited. (See Reverse).

OFFICIAL USE

FROM ALBANY, NY 12206
TO BOX 871
Albany, NY 12201

TO Titan Financial, LLC
30 North Gould Street
Sheridan, WY 82801

PS Form 3806, Registered Mail Receipt
April 2015 PSN 7530-02-000-9051

Copy 1 - Customer
(See Information on Reverse)

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Titan Financial, LLC
30 North Gould Street
Sheridan, WY 82801



9590 9402 8929 4064 0501 79

2. Article Number (Transfer from service label)

RB 816198577US

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

WY CO

8/15/24

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery
- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

PS Form 3811, July 2020 PSN 7530-02-000-9053